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| FORM PTO 1390<br>(REV 5-93)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                               | US DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | ATTORNEY DOCKET NUMBER<br>2006_1330A     |
| TRANSMITTAL LETTER TO THE UNITED STATES<br>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br>-CONCERNING A FILING UNDER 35 U.S.C. §371                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |                                                       | U.S. APPLICATION NO.<br><b>10/591327</b> |
| International Application No.<br>PCT/JP2005/019402                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | International Filing Date<br>October 21, 2005 | Priority Date Claimed<br>December 7, 2004             |                                          |
| <b>Title of Invention</b><br>ACCESS UNIT, ACCESS METHOD, ACCESS PROGRAM, AND CONTROL UNIT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                               |                                                       |                                          |
| <b>Applicant(s) For DO/EO/US</b><br>Harumitsu MIYASHITA et al.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |                                                       |                                          |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                               |                                                       |                                          |
| 1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. §371.<br>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing under 35 U.S.C. §371.<br>3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. §371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. §371(b) and PCT Articles 22 and 39(1).<br>4. <input type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.<br>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. §371(c)(2))<br>a. <input checked="" type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau). <b>ATTACHMENT A</b><br>b. <input type="checkbox"/> has been transmitted by the International Bureau.<br>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US)<br>6. <input checked="" type="checkbox"/> A translation of the International Application into English (35 U.S.C. §371(c)(2)). <b>ATTACHMENT B</b><br>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. §371(c)(3)).<br>a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).<br>b. <input type="checkbox"/> have been transmitted by the International Bureau.<br>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br>d. <input type="checkbox"/> have not been made and will not be made.<br>8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19.<br>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. §371(c)(4)). <b>ATTACHMENT C</b><br>10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. §371(c)(5)).<br><b>Items 11. to 14. below concern other document(s) or information included:</b><br>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. <b>ATTACHMENT D</b><br>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.<br>13. <input checked="" type="checkbox"/> A <b>FIRST</b> preliminary amendment. <b>ATTACHMENT E</b><br><input type="checkbox"/> A <b>SECOND</b> or <b>SUBSEQUENT</b> preliminary amendment.<br>14. <input checked="" type="checkbox"/> Other items or information: a. Form PCT/IB/304. <b>ATTACHMENT F</b> |                                               |                                                       |                                          |

THE COMMISSIONER IS AUTHORIZED  
TO CHARGE ANY DEFICIENCY IN THE  
FEES FOR THIS PAPER TO DEPOSIT  
ACCOUNT NO. 23-0975

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------|
| U.S. APPLICATION NO. <b>10/591327</b><br>NEW                                                                                                                                                                                                                                                                                                                                                                                                                          |              | INTERNATIONAL APPLICATION NO.<br>PCT/JP2005/019402 |                                                                                                                                                                                                                                                                                                                      | ATTORNEY'S DOCKET NO.<br>2006_1330A |              |
| 15. [X] The following fees are submitted                                                                                                                                                                                                                                                                                                                                                                                                                              |              |                                                    |                                                                                                                                                                                                                                                                                                                      | CALCULATIONS                        | PTO USE ONLY |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |
| Basic National Stage Fee ..... \$300.00<br>National Stage Search Fee (International Search Report provided - 37 CFR 1.492(b)(2)) ..... \$400.00<br>National Stage Examination Fee ..... \$200.00<br>Specification/drawings in excess of 100 pages ( units of 50 x \$250.00) = ..... \$                                                                                                                                                                                |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |
| ENTER APPROPRIATE BASIC FEE AMOUNT =                                                                                                                                                                                                                                                                                                                                                                                                                                  |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$ 900.00                           |              |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).                                                                                                                                                                                                                                                                     |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$                                  |              |
| Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Number Filed | Number Extra                                       | Rate                                                                                                                                                                                                                                                                                                                 |                                     |              |
| Total Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 14 - 20 =    | 0                                                  | X \$50.00                                                                                                                                                                                                                                                                                                            | \$                                  |              |
| Independent Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4 - 3 =      | 1                                                  | X \$200.00                                                                                                                                                                                                                                                                                                           | \$ 200.00                           |              |
| Multiple dependent claim(s) (if applicable)                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                    | + \$360.00                                                                                                                                                                                                                                                                                                           | \$                                  |              |
| TOTAL OF ABOVE CALCULATIONS =                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$1100.00                           |              |
| <input type="checkbox"/> Small Entity Status is hereby asserted. Above fees are reduced by 1/2.                                                                                                                                                                                                                                                                                                                                                                       |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$                                  |              |
| SUBTOTAL =                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$1100.00                           |              |
| Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).                                                                                                                                                                                                                                                                |              |                                                    |                                                                                                                                                                                                                                                                                                                      | +                                   | \$           |
| TOTAL NATIONAL FEE =                                                                                                                                                                                                                                                                                                                                                                                                                                                  |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$1100.00                           |              |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40 per property +                                                                                                                                                                                                                                                                                                 |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$                                  |              |
| TOTAL FEES ENCLOSED =                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                    |                                                                                                                                                                                                                                                                                                                      | \$1100.00                           |              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                    |                                                                                                                                                                                                                                                                                                                      | Amount to be refunded               | \$           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                    |                                                                                                                                                                                                                                                                                                                      | Amount to be charged                | \$           |
| a. [X] A check in the amount of \$1100.00 to cover the above fees is enclosed. A duplicate copy of this form is enclosed.<br>b. <input type="checkbox"/> Please charge my Deposit Account No. 23-0975 in the amount of \$_____ to cover the above fees.<br>A duplicate copy of this sheet is enclosed.<br>c. [X] The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 23-0975. |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |
| <b>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</b>                                                                                                                                                                                                                                                      |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |
| 19. CORRESPONDENCE ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                    | By: <br>Jeffrey R. Filipek,<br>Registration No. 41,471<br>WENDEROTH, LIND & PONACK, L.L.P.<br>2033 "K" Street, N.W., Suite 800<br>Washington, D.C. 20006-1021<br>Phone: (202) 721-8200<br>Fax: (202) 721-8250<br>August 31, 2006 |                                     |              |
| CUSTOMER NO.<br><b>52349</b>                                                                                                                                                                                                                                                                                                                                                                                                                                          |              |                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |              |

[CHECK NO. 75982]

[2006\_1330A]